**工勤人员技能等级岗位考核成绩复查申请表**

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| **姓名** |  | **身份证号码** |  |
| **工作单位** |  | **联系电话** |  |
| **工种** |  | **等级** |  |
| **复查科目名称** | **准考证号** | **原始成绩** |
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|   |   |   |
| **设区市工考机构****意见（盖章）/****省直单位人事部门意见（盖章）** |   |